ARIZONA FORM Resident Personal Income Tax Return Or fiscal year beginning M M D D 2 0 0 4 and ending M M D D 2 0 0 5. 66

LAST NAME YOUR SOCIAL S YOUR FIRST NAME AND INITIAL YOUR SOCIAL SECURITY NO. 1 IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL LAST NAME SPOUSE'S SOCIAL SECURITY NO.

L	1									
-	_	ENT HO	OME ADDRESS	S - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIME PHONE: ()	↑ IN	IPORTANT	1	
_=	2				94 HOME PHONE: (You must enter your SSNs.		
-	_	TOWN (OR POST OFF	ICE STATE ZIP CODE		FOR DOR	USE ONL	Υ		
Ţ	3									
Filing Status	4			ng joint return						
	5		Head of household - name of qualifying child or dependent:							
g	6		Married filing separate return. Enter spouse's Social Security Number above							
	L	Ш	and full name here. ▶			88				
	, ,	Single								
ons	8	Ш	Enter the	Age 65 or over (you and/or spouse)		81	80			
pţį	9	Ш	number claimed. Do Blind (you and/or spouse)			82 CHECK ONE if filing und	der an ext	ension:		
xen	8 9 10 11	Ш	not put a			4 month	extension	82D		
Schedule A if required.		check mark.	Qualifying parents and ancestors of your parents.				extension	82F		
		, , , , ,						1	00	
		, , ,							00	
redu	ı	Add lines 12 and 13							00	
Αï		(This line not used.) 6 Subtractions from income (from page 2, line C18 or line C29). Enter the number from line C27a: 161							00	
anp				I gross income. Subtract line 16 from line 14					00	
iach W-2 to back of last page of the return. Enclose but do not attach payments. If itemizing, attach your federal Schedule A and Arizona				heck box and enter amount. See instructions, pag					00	
				71 0					00	
		Personal exemptions. See pages 12 and 13 of the instructions							00	
		Compute the tax using amount on line 20 and Tax Rate Table X, Y or Optional Tax Rate Tables							00	
		Tax from recapture of credits from Arizona Form 301, line 31 Subtotal of tax. Add lines 21 and 22 - 25 Clean Elections Fund Tax Reduction. See instructions, page 13. 241 YOURSELF 242 SPOUSE							00	
									00	
	24								00	
									00	
					instructions				00	
	28	Cred	its from Ariz	zona Form 301, line 58, or Forms 310, 321 <u>, 32</u> 2, and	323 if Form 301 is not	required	28		00	
	29	8 Credits from Arizona Form 301, line 58, or Forms 310, 321, 322, and 323 if Form 301 is not required								
	30								00	
	31			Subtract lines 27, 28 and 30 from line 26. If the sum				00		
	32 Arizona income tax withheld during 2004								00	
	33	2 Arizona income tax withheld during 2004 3 Arizona estimated tax payments for 2004 4 Amount paid with 2004 Arizona extension request (Form 204)							00	
	25	5. Increased Excise Tay Credit from worksheet on page 17 of the instructions							00	
	35	5 Increased Excise Tax Credit from worksheet on page 17 of the instructions							00	
	۳۷	1 TOP	city lax ore	5uit ii 0iii 1 0iiii 1 1 01 1 0					00	
		7 Other refundable credits. Check box(es) and enter amount(s): 37A1 329 37A2 330							00	
		TAX DUE. If line 31 is larger than line 38, subtract line 38 from line 31 and enter amount of tax due. Skip lines 40, 41 and 42							00	
		O OVERPAYMENT. If line 38 is larger than line 31, subtract line 31 from line 38 and enter amount of overpayment							00	
	ı	I Amount of line 40 to be applied to 2005 estimated tax							00	
	42	Balance of overpayment. Subtract line 41 from line 40							00	
	43		/oluntary G	lifts to:		•				
			Aid to Édu		itizens Clean Elections 45	00				
		Child	child Abuse Prevention 46 00 Domestic Violence Shelter 47 00 Neighbors Helping Neighbors 48 00							
			Special Olympics 49 00 Political Gift 50 00							
		Check only one if making a political gift: 511 Democratic 512 Libertarian 513 Republican					52	1		
			Estimated payment penalty and MSA withdrawal penalty						00	
		3 Check applicable boxes: s31 Annualized/Other s32 Farmer or Fisherman s33 Form 221 attached s34 MSA Penalty								
	54	I Total of lines 43, 44, 45, 46, 47, 48, 49, 50 and 52					54		00	
	၂၁၁	KEH	UND. SUDI Direct Depo	nact line 34 from line 42. If less than zero, enter amo sit of Refund: See instructions.		55		00		
		ROUTING NUMBER ACCOUNT NUMBER C C Checking or								
	56	98 AMO	UNT OWF	D. Add lines 39 and 54. Make check payable to A	rizona Department of	Revenue: include SSN on payr	ment. 56		00	
						man, manade con on pays				

Form 140 (2004) Page 2 of 2

PART A: Dependents and Qualifying Parents - do not list yourself or spouse If completing Part A, also complete Part C, lines C16 and/or C17 and C18. List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 Enter total number of persons listed in A1 here and on the front of this form, box 10. Also complete Part C below....... TOTAL A2 A2 A3 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return: List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 **A5** PART B: Additions to Income Non-Arizona municipal interest 00 **B6** 00 **B7** Early withdrawal of Arizona Retirement System contributions not included on your federal return..... **B7** 00 **B8** Ordinary income portion of lump-sum distributions excluded on your federal return..... **B8 B9** Total federal depreciation..... **B9** 00 **B10** 00 B10 Medical savings account (MSA) distributions. See page 6 of the instructions. 00 **B11** B11 I.R.C. §179 expense in excess of allowable amount. See page 6 of the instructions..... 00 Other additions to income. See instructions and attach your own schedule **B12 B13** 00 B13 Total. Add lines B6 through B12. Enter here and on the front of this form, line 13 PART C: Subtractions from Income Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100 C14 00 C15 00 C15 Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500 C16 Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300..... C16 00 Exemption: Qualifying parents and ancestors of your parents. Multiply the number in C17 00 box 11, page 1, by \$10,000..... C17 C18 Total exemptions: Add lines C14 through C17. If you have no other subtractions from income, skip lines C19 through C29 and enter the amount on line C18 on Form 140, Page 1, line 16. C18 00 00 C19 Interest on U.S. obligations such as U.S. savings bonds and treasury bills C19 00 C20 Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)..... C20 00 C21 Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)...... C21 00 C22 C22 U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return C23 00 C23 Recalculated Arizona depreciation 00 C24 C24 Certain wages of American Indians 00 C25 Income tax refund from other states. See instructions C25 00 C26 Deposits and employer contributions into MSAs. See pages 9 and 10 of the instructions..... C26 00 C27 Construction of an energy efficient residence. See page 10 of the instructions. Enter number: C27a ______, then amount...... C27 00 C28 Other subtractions from income. See instructions and attach your own schedule C28 C29 Total: Add lines C18 through C28. Enter here and on the front of this form, line 16..... C29 Part D: Last Name(s) Used in Prior Years if different from name(s) used in current year D30 I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) PAID PREPARER'S TIN DATE PAID PREPARER'S ADDRESS If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016. If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

ADOR 91-0011 (04)